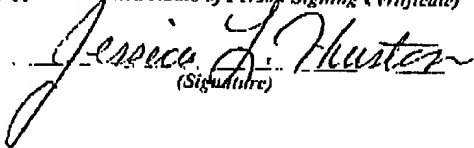
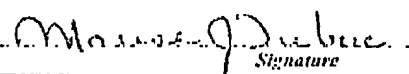


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No.
Applicant(s): KLAUS KURSAWE			CHI920000068US1
Application No. 09/683,972	Filing Date 03/07/2002	Examiner S. S. SNAPP	Group Art Unit 3624
Invention: METHOD FOR CREDIT CARD NOTIFICATION			
RECEIVED CENTRAL FAX CENTER DEC 28 2005			
<p>I hereby certify that this _____ Transmittal, Ext. of Time, and Amendment _____ (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300)</p> <p>on 12/27/2005 (Date)</p> <p style="text-align: center;">Jessica L. Huston (Typed or Printed Name of Person Signing Certificate)</p> <p style="text-align: center;"> (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. CHI920000068US1	
Applicant(s): KLAUS KURSAWE						
Application No. 09/683,972	Filing Date 03/07/2002	Examiner S. S. Snapp	Customer No. 48915	Group Art Unit 3624	Confirmation No. 9293	
Invention: METHOD FOR CREDIT CARD NOTIFICATION				RECEIVED CENTRAL FAX CENTER DEC 28 2005		
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	18 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0468 <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: December 27, 2005			
Marisa J. Dubuc Reg. No. 46,673 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 860-286-2929			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
cc:						